


Please type a plus sign (+) inside this box → 

PTO/55/21 (08-00)

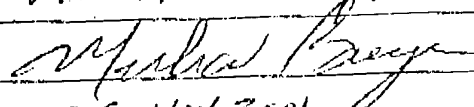
Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/300,930	
	Filing Date	4/28/99	
	First Named Inventor	PACHL	
	Group Art Unit	1711	
	Examiner Name	FOELAK	
Total Number of Pages in This Submission		7	
		Attorney Docket Number	030035P-3

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts / Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Answer, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): CPA TRANS CERT OF FAX
Remarks CONF. NO. 5002		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	MICHAEL BOYER
Signature	
Date	29 NOV 2001

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: _____	
Typed or printed name	
Signature	Date

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PTO/SB/17 (11-00)

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FEE TRANSMITTAL
for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(S) 2180

Complete if Known

Application Number

09/300,930

Filing Date

4/28/99

First Named Inventor

PACHL

Examiner Name

POELAK

Group Art Unit

1711

Attorney Docket No.

06003 JP-3

METHOD OF PAYMENT

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

15-0680

Deposit Account Name

OLSCHELN

- ☒
- Charge Any Additional Fee Required Under 37 CFR 1.113 and 1.17

☐ Applicant claims small entity status, See 37 CFR 1.17

- 2.
- ☐
- Payment Enclosed:

☐ Check☐ Credit card☐ Money Order☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Fee Fee Fee

Code (S) Code (S)

101 710 201 355

106 320 206 160

107 400 207 245

108 710 208 355

114 150 214 75

Fee Description

Utility filing fee

Design filing fee

Plant filing fee

Reissue filing fee

Provisional filing fee

Fee Paid

SUBTOTAL (1)

(S) 740

2. EXTRA CLAIM FEES

Total Claims
Independent
Claims
Multiple Dependent

Extra Claims

201

202

203

204

Fee from below

X

X

X

X

X

Fee Paid

Large Entity Small Entity

Fee Fee Fee Fee

Code (S) Code (S)

102 18 202 9

102 24 202 40

104 270 204 105

105 100 205 40

110 18 210 3

Fee Description

Claims in excess of 20

Independent claims in excess of 3

Multiple dependent claim, if not paid

Reissue independent claims over original patent

Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(S) 0

For number previously paid, if specified. For Reissues, see above.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Fee Fee Fee

Code (S) Code (S)

105 130 205 55

127 50 227 25

139 130 239 130

147 2,520 247 2,520

112 920 212 920

111 1,340 211 1,340

116 110 216 55

115 350 215 195

117 550 217 45

118 1,450 218 155

128 1,990 228 945

119 310 219 155

120 310 220 155

121 270 221 135

138 1,510 238 1,310

140 110 240 55

141 1,240 241 620

142 1,240 242 620

143 240 243 220

144 600 244 300

122 130 222 130

125 50 225 50

126 160 226 160

581 40 581 40

146 710 246 355

149 710 249 355

179 710 279 355

169 900 269 900

Fee Description

Surcharge - late filing fee or oath

Surcharge - late provisional filing fee or cover sheet

Non-English specification

For filing a request for ex parte reexamination

Requesting publication of SIR prior to Examiner action

Requesting publication of SIR after Examiner action

Extension for reply within first month

Extension for reply within second month

Extension for reply within third month

Extension for reply within fourth month

Extension for reply within fifth month

Notice of Appeal

Filing a brief in support of an appeal

Request for oral hearing

Petition to institute a public use proceeding

Petition to revive - unavoidable

Petition to revive - unintentional

Utility issue fee (for reissue)

Design issue fee

Plant issue fee

Petitions to the Commissioner

Processing fee under 37 CFR 1.17(a)

Submission of Information Disclosure Sheet

Recording each patent assignment per property (times number of proccomes)

Filing a submission after final rejection (37 CFR § 1.129(a))

For each additional invention to be examined (37 CFR § 1.129(c))

Request for Continued Examination (RCE)

Request for expedited examination of a design application

Other fee (specify)

Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(S) 1440

SUBMITTED BY

Name (print/type)

MICHAEL BOYER

Signature

Michael Boyer

Registration No.

33085

Complete if known

Telephone

6622694536

Date

11/29/01

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